

ALL PATENTS, INCLUDING DESIGN  
FOR APPLICATION BASED ON PCT; PARIS CONVENTION;  
NON PRIORITY; OR PROVISIONAL APPLICATIONS



DECLARATION  
AND POWER OF ATTORNEY  
U.S.A.

FOR ATTORNEYS' USE ONLY  
ATTORNEYS' DOCKET NO.

As a below-named inventor, I declare that my residence, post office address and citizenship are stated below next to my name. The information given herein is true, that I believe that I am the original, first and sole inventor (if only one name is listed at 201 below), or an original, first and joint inventor (if plural inventors are named below at 201-203, or on additional sheets attached hereto) of the subject matter which is claimed and for which patent is sought on the invention entitled:

A Universally Applicable Virus Inactivated Blood Plasma Produced From Portions Of Non-Caucasian Plasma

which is described and claimed in:

PCT International Application No. PCT/EP 2004/053608

filed 20 December 2004

the attached specification

the specification in application Serial No. \_\_\_\_\_

filed \_\_\_\_\_

(If applicable) and amended on \_\_\_\_\_

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above. I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, §1.56.

I hereby claim foreign priority benefits under Title 35, United States Code, §119 (a)-(d) of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

Prior Foreign Application(s)

03 029 359.1

Europe

(Number)

(Country)

19 December 2003

(Day/Month/Year Filed)

You

No

(Number)

(Country)

(Day/Month/Year Filed)

Yes

No

(Number)

(Country)

(Day/Month/Year Filed)

Yes

No

I hereby claim the benefit under Title 35, United States Code, §119(e) of any United States provisional application(s) listed below:

Application No. \_\_\_\_\_

Filing Date \_\_\_\_\_

Application No. \_\_\_\_\_

Filing Date \_\_\_\_\_

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, §1.56 which became available between the filing date of the prior application and the national or PCT International filing date of this application:

(Application Serial No.)

(Filing Date)

(Status: patented, pending, abandoned)

POWER OF ATTORNEY: As a named Inventor, I hereby appoint the following attorneys (Registration No.) to prosecute this application, receive and act on instructions from my agent, and transact all business in the Patent and Trademark Office connected therewith. HARVEY B. JACOBSON, JR. (20,851); JOHN CLARKE HOLMAN (22,769); MARVIN R. STERN (20,640); ALLEN S. MELSER (27,215); MICHAEL R. SLOBASKY (26,421); JONATHAN L. SCHERER (29,851); IRWIN M. AISENBERG (19,007); WILLIAM E. PLAYER (31,409); YOON S. HAM (45,307) and NATHANIEL A. HUMPHRIES (22,772)

SEND CORRESPONDENCE TO: CUSTOMER NO. 00130

or

**JACOBSON HOLMAN**  
PROFESSIONAL LIMITED LIABILITY COMPANY  
400 SEVENTH STREET, N.W.  
WASHINGTON, D.C. 20004

DIRECT TELEPHONE CALLS TO:

(please use Attorney's Docket No.) (202) 638-6686

**JACOBSON HOLMAN**  
PROFESSIONAL LIMITED LIABILITY COMPANY

\*Inventor(s) name must include at least one unabbreviated first or middle name.

201	FULL NAME OF INVENTOR	FAMILY NAME HEGER	GIVEN NAME Andrea	MIDDLE NAME
	RESIDENCE & CITIZENSHIP	CITY Wien	STATE OR FOREIGN COUNTRY Austria	COUNTRY OF CITIZENSHIP Austria
	POST OFFICE ADDRESS	POST OFFICE ADDRESS Kaiser-Ebersdorferstr. 11/4/7	CITY Wien	STATE OR COUNTRY Austria
202	FULL NAME OF INVENTOR	FAMILY NAME RÖMISCH	GIVEN NAME Jürgen	MIDDLE NAME
	RESIDENCE & CITIZENSHIP	CITY Gramatneusiedl	STATE OR FOREIGN COUNTRY Austria	COUNTRY OF CITIZENSHIP Germany
	POST OFFICE ADDRESS	POST OFFICE ADDRESS Beerengasse 1	CITY Gramatneusiedl	STATE OR COUNTRY Austria
203	FULL NAME OF INVENTOR	FAMILY NAME SVAE	GIVEN NAME Tor-Einar	MIDDLE NAME
	RESIDENCE & CITIZENSHIP	CITY Mödling	STATE OR FOREIGN COUNTRY Austria	COUNTRY OF CITIZENSHIP Norway
	POST OFFICE ADDRESS	POST OFFICE ADDRESS Karlgasse 9	CITY Mödling	STATE OR COUNTRY Austria

I further declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment or both, under section 1001 of Title 18 of the United States Code; and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

SIGNATURE OF INVENTOR 201\*



DATE

04.09.2006 / Sept 1, 2006

SIGNATURE OF INVENTOR 202\*



DATE

September 1, 2006

SIGNATURE OF INVENTOR 203\*



DATE

September 1, 2006

Additional inventors are named on separately numbered sheets attached hereto.

JACOBSON HOLMAN PLLC  
ADDITIONAL INVENTORS

\* Inventor(s) name must include at least one unabbreviated first or middle name.

204	FULL NAME OF INVENTOR RESIDENCE & CITIZENSHIP POST OFFICE ADDRESS	FAMILY NAME MARGUERRE CITY Heidelberg POST OFFICE ADDRESS Philosophenweg 21	GIVEN NAME Wolfgang STATE OR FOREIGN COUNTRY Germany CITY Heidelberg	MIDDLE NAME COUNTRY OF CITIZENSHIP Germany STATE OR COUNTRY Germany ZIP CODE D-69120
205	FULL NAME OF INVENTOR RESIDENCE & CITIZENSHIP POST OFFICE ADDRESS	FAMILY NAME CITY POST OFFICE ADDRESS	GIVEN NAME STATE OR FOREIGN COUNTRY CITY	MIDDLE NAME COUNTRY OF CITIZENSHIP STATE OR COUNTRY ZIP CODE
206	FULL NAME OF INVENTOR RESIDENCE & CITIZENSHIP POST OFFICE ADDRESS	FAMILY NAME CITY POST OFFICE ADDRESS	GIVEN NAME STATE OR FOREIGN COUNTRY CITY	MIDDLE NAME COUNTRY OF CITIZENSHIP STATE OR COUNTRY ZIP CODE
207	FULL NAME OF INVENTOR RESIDENCE & CITIZENSHIP POST OFFICE ADDRESS	FAMILY NAME CITY POST OFFICE ADDRESS	GIVEN NAME STATE OR FOREIGN COUNTRY CITY	MIDDLE NAME COUNTRY OF CITIZENSHIP STATE OR COUNTRY ZIP CODE
208	FULL NAME OF INVENTOR RESIDENCE & CITIZENSHIP POST OFFICE ADDRESS	FAMILY NAME CITY POST OFFICE ADDRESS	GIVEN NAME STATE OR FOREIGN COUNTRY CITY	MIDDLE NAME COUNTRY OF CITIZENSHIP STATE OR COUNTRY ZIP CODE
209	FULL NAME OF INVENTOR RESIDENCE & CITIZENSHIP POST OFFICE ADDRESS	FAMILY NAME CITY POST OFFICE ADDRESS	GIVEN NAME STATE OR FOREIGN COUNTRY CITY	MIDDLE NAME COUNTRY OF CITIZENSHIP STATE OR COUNTRY ZIP CODE
210	FULL NAME OF INVENTOR RESIDENCE & CITIZENSHIP POST OFFICE ADDRESS	FAMILY NAME CITY POST OFFICE ADDRESS	GIVEN NAME STATE OR FOREIGN COUNTRY CITY	MIDDLE NAME COUNTRY OF CITIZENSHIP STATE OR COUNTRY ZIP CODE
211	FULL NAME OF INVENTOR RESIDENCE & CITIZENSHIP POST OFFICE ADDRESS	FAMILY NAME CITY POST OFFICE ADDRESS	GIVEN NAME STATE OR FOREIGN COUNTRY CITY	MIDDLE NAME COUNTRY OF CITIZENSHIP STATE OR COUNTRY ZIP CODE

I further declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are to be true, and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment or both, under section 101 of Title 18 of the United States Code; and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

SIGNATURE OF INVENTOR 204 *	SIGNATURE OF INVENTOR 205 *	SIGNATURE OF INVENTOR 206 *
 X 6/09/06		
DATE	DATE	DATE
SIGNATURE OF INVENTOR 207 *	SIGNATURE OF INVENTOR 208 *	SIGNATURE OF INVENTOR 209 *
DATE	DATE	DATE
SIGNATURE OF INVENTOR 210 *	SIGNATURE OF INVENTOR 211 *	
DATE	DATE	